Chesterfield Community Services Board Mental Health Support Services FY05 Agency Performance Analysis Report



"Pathway to Improving

The Lives of Our Citizens"

Contact: Kelly Fried, Strategic Leader, Planning & Quality

Chesterfield Community Services Board (CSB)

Mission:

Our mission is to promote an improved quality of life for people in our community by identifying the needs and facilitating the provision of exceptional and comprehensive mental health, mental retardation, substance abuse, prevention and early intervention services.

Vision:

Our community supports all people in living lives that are productive, healthy, meaningful and satisfying.

Values:

Provide excellent customer service
Value staff as our most important resource
Be responsible stewards of public resources
Act with integrity
Promote prevention
Create accessible services
Meet the changing needs of the community

Chesterfield Community Services Board (CSB) is one of forty (40) Boards in Virginia that offer a comprehensive array of services in mental health, mental retardation, substance abuse, prevention and early intervention services. The CSB is a department of Chesterfield County Government that provides these services to meet the needs of the citizens of Chesterfield County.

The CSB continues to be dedicated to improving the lives of the citizens and the services that are provided. This report is a summary of key initiatives that occurred during the past year with a focus on improvements that we are sharing with our consumers and their families, key stakeholders, and staff.

Our Services:

Adult and Emergency Services Chesterfield Employment Services Chesterfield Infant Program Child & Adolescent Services Day Program Services Families First Medical Services Prevention Services
Psychiatric Rehabilitative Services
Psychosocial Club House (Chester House)
Residential & Supported Living Services
Service Coordination
Substance Abuse Services

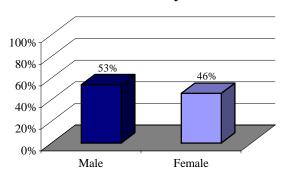
Our Customers:

Number of Citizens Served

Mental Health Services3591Mental Retardation Services1768Substance Abuse Services1264Prevention Services12042

Families First 113 families, 77 children

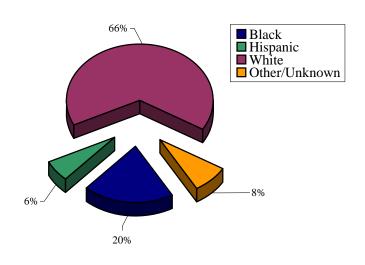
Citizens by Gender



Citizens by Age

55% 50% 40% 31% 30% 10% 0% 0-17 18-22 23-59 60+

Citizens Ethnicity



Our Budget For Fiscal Year 2003/2004 & Sources of Revenue:

Resource Partners

Expenditures by Category

Fees/Other	\$12,650,400	Mental Health	\$ 7,773,700
State Funds	3,551,900	Mental Retardation	14,729,200
Federal Funds	1,037,300	Substance Abuse	2,829,100
Local Funds	8,092,400		
Total	\$25,332,000	Total	\$25,332,000

Our Goals & Accomplishments:

Listed below are some of our accomplishments during the past year as well as areas of focus during the next fiscal year.

Goal #1: Enhance our ability to recruit, retain and maximize the contributions of a competent, diverse work force.

- 366 recognition awards were provided to staff for either going above and beyond in service delivery or for participation on agency project teams.
- 2 Customer Service events were held this past year to nominate staff who have demonstrated excellent customer service. Nominations averaged 80 per week and staff received candy bars as a reward.
- Cultural Competency Committee sponsored the following activities:
 - ➤ Unveiled a diversity themed artwork at the Annual Dinner that is now on display in the lobby.
 - Established the Annual Diversity Award recognizing those who work to create a more diverse and culturally competent work and service environment. One staff member received the award during the Agency Annual Dinner in November.
 - ➤ Held a forum and celebration of Black History Month for staff that included a discussion and a professional storyteller.
 - ➤ Held a Brown Bag luncheon for staff on Autism during Autism Awareness Month.

- Improve employee recruitment process.
 - > Review & revise processes to reduce cycle time.
 - ➤ Identify job specific core competencies.
- Increase employee retention.
 - > Review salaries to ensure equity.
 - Develop a process to track and analyze recognition.
- Promote a highly skilled & high performance workforce.
 - > Expand opportunities for cultural competency training.
 - ➤ Implement the Employee Development Plan process to include goals, objectives & development.

Goal #2: Produce the most positive consumer outcomes for the investment.

FY05 Agency Accomplishments:

- 99.8% of incoming emergency service calls were answered by clinicians without any callbacks.
- All direct service programs met their productivity goals for FY05.
- 96% of budgeted third party revenue was collected which met our goal of collecting at least 95%.
- Approximately 1,400 adults and children with mental retardation accessed case management services.
- Chesterfield Service Coordination led the state in enrollment of customers in the new Consumer Directed Waiver Services.
- The New Chester House building is almost finished and the move date is projected to be August, 2005.

FY06 Objectives & Opportunities for Improvement:

- Allocate resources to provide services critical or important to the community.
 - Review annual planning and budget process to determine if a multi year planning and resource allocation process should be adopted.
- Maximize revenue and minimize cost.
 - ➤ Pursue additional revenue sources from grants and contracts, fund raising, and additional service revenue.
- Streamline internal processes.
 - ➤ Evaluate the cost benefit for the organization to continue to provide non emergency services to consumers with behavioral healthcare insurance.

- ➤ Identify any major processes that may have a high cost benefit if improved in a reasonable time.
- ➤ Review the organizational policies around length of stay criteria for possible amendment and improvement.
- While emergency and urgent care requests were either met immediately or
 within one week, the overall department Access goal was not achieved for
 FY05. Wait times for routine appointments for Child & Adolescent Services
 Team (CAST), Medical Services, Mental Health and Substance Abuse Adult
 services continue to be high. Efforts are being made, such as the CAST Access
 Process Action Team, to address the barriers and develop action plans to
 improve access.

Goal #3: Strengthen partnerships with consumers, family members and advocates.

- 100% of all formal/informal complaints were acknowledged and documented immediately and 88% of those were resolved within 48 hours.
- Consumer response to Post Discharge Follow-up surveys improved from 23% in FY04 to 30 % in FY05.
- 83% of all programs met their customer satisfaction survey objectives.
- The agency has begun to embrace the concept of "Recovery" in mental health which is clearly in alignment with the President's "New Freedom Commission on Mental Health", Virginia DMHMRSAS vision, and the Olmstead Act. Activities have included promoting and financing consumer education, services, a consumer driven organization, and other Recovery based initiatives in hopes of transforming our own system and influencing others. In FY05, consumers were involved in the following activities:
 - ➤ 8 persons served at Chester House attended Consumer Empowerment and Leadership Training and 1 of those persons attended advanced Consumer Empowerment and Leadership Training.
 - ➤ 3 persons served at Chester House and several staff attended the Recovery Education and Creative Healing (REACH) kick-off
 - ➤ 1 person served at Chester House and one peer provider were trained as Wellness Recovery Action Plan (WRAP) facilitators. We have offered 3 different WRAP groups to persons served in Psychiatric Rehabilitation Services, and we offered one for persons served at another CSB.
 - ➤ 3 persons served attended the Governors conference on Recovery, Empowerment and Self-determination.
 - ➤ 5 persons served at Chester House are actively involved in the statewide consumer's association Virginia Organization of Consumers Asserting Leadership (VOCAL).

- ➤ 2 persons will complete the Virginia Human Services Training program and become consumer/providers in the CSB.
- ➤ 3 staff attended Recovery training at the Boston Psychiatric Rehabilitation program.
- ➤ 3 persons served attended the Virginia Psychiatric Rehabilitation Association conference.
- ➤ 2 persons served are active members on our Community Services Board.
- ➤ A Recovery in-service training with Mary McQuown & Richmond Mental Wellness Mentors is planned for July 2005.
- Service Coordination led many hours of customer advocacy events that have empowered our customers to be the leaders in state advocacy. A devoted group of customers and their families coordinated a strong state advocacy campaign that was recognized by the Virginia Association of Community Services Boards (VACSB) and the Virginia Association of Retarded Citizens (Va.ARC).
- Service Coordination has continued to sponsor the largest chapter in Virginia, the People First Action Club of Chesterfield, which has provided input to the design of community programs at State and National levels.
- Service Coordination sponsored an Annual Regional Provider Fair with area service vendors to enhance consumer choice in area providers.

- Maximize involvement of consumers and family members in the design, implementation, and evaluation of all CSB operations.
- Improve consumer and family members abilities to advocate for themselves and others.
 - ➤ Develop local education/training for consumer and family members to learn advocacy skills.
- Exceptional customer service.
 - > Exceed customer service expectations.

Goal #4: Plan and implement a state-of-the-art service system to ensure continued leadership in community based behavioral health services.

- NaCo Award Recipient for the Medication Group program developed between Medical Services and Adult/Emergency Services.
- NaCo Award Recipient for the Crisis Stabilization program that operates with the goal of averting hospitalization.

- Reinvestment funds enabled us to hire a registered nurse for the Psychiatric Rehabilitation Services program and a Crisis Stabilization worker. The Registered Nurse assists persons in the community with filling pill boxes, monitoring medication use, monitoring blood pressure and glucose levels, and coordinating medical services of the CSB with those in the private community.
- 6 programs have successfully developed outcome indicators and generally are producing measurable consumer outcomes that meet or exceed expectations.
- 4 Mental Health/Substance Abuse programs developed and piloted Utilization Management approaches in the last quarter of FY05. 86% of the cases or measures met the level of care/standard of care criteria, exceeding the objective of 75%.

- Provide services that meet or exceed standards.
- Increase the use of evidence based practices
 - ➤ Conduct 2-3 additional Evidence Based practices pilot projects (include Community Services).
 - ➤ Conduct systematic training in selected Evidence Based Practices to cover gaps in staff skills.
- Measure consumer outcomes and use the results to promote continuous quality improvement.
 - Collaborate with Quality Council to study/improve consumer outcomes via 1-2 Total Quality Improvement projects.

Goal #5: Maximize community support via a systematic community relations effort.

- In the spring of 2005, the CSB adopted "Mental Health Support Services" as the name for our agency's service provider system. The provider system includes numerous programs, each with their own unique identity and consumer base.
- The Network of Care for Behavioral Health Website has been operating since March, 2005 and during the first 4 months, there were 949 visits to the site and 81,299 successful hits for the entire site. This is an online information place for individuals, families and agencies who are concerned about mental and emotional wellness. This online community provides critical information, communication and advocacy tools with a single point of entry. It ensures

there is "No Wrong Door" for those navigating the system of behavioral health services, those working to avoid the need for formal services, and those ready to transition out of the behavioral health system.

FY06 Objectives & Opportunities for Improvement:

- Consistently & effectively promote the organization. This will include developing a schedule for rolling out our new agency name. Activities include: revising internal documents, changing operational activities such as answering phones and voice mail, and public affairs using our new name in its publications. Additional activities include promoting the organization's vision to "Be widely known as a highly effective and caring organization". A work group will be charged with developing a "blueprint" that identifies the organization's markets, outlining appropriate goals related to those markets, and making recommendations for assigning resources to accomplish those goals.
- Future plans to promote the Network of Care Website include distribution of Website bookmarks throughout the county library system, a second distribution of promotional material in early FY06 to Mental Health Support Services staff and to other county human service agencies.
- Strengthen alliances and partnerships with key stakeholders.
 - > Pursue and obtain active stakeholder support.

Goal #6: Promote highly principled behavior and minimize organizational risk.

- Risk Management Committee developed the first agency wide "Risk Management Training Week" during October 25-29, 2004. This week was devoted to training all staff on the Event Management Plan, Confidentiality/HIPAA, Emergency Preparedness, Infection Control, Bloodborne Pathogens, Universal Precautions, Dr. Eli and Fire Extinguisher/Hazard Communications. We will continue to hold this training annually in October.
- The Risk Management Committee developed an Agency Wide Risk Assessment tool to monitor risks in areas such as Health & Safety, Corporate Compliance, Human Resources, Service Delivery, Finance, and Environmental Factors. 42 indicators were developed as part of this tool and implementation of the tool will occur August, 2005. The results will be used during the Strategic Planning process and will also provide information that can be used for staff training.

- The Risk Management Committee developed the "Employee Request for Accommodation Form" that employees can complete when there is a need for a special accommodation due to health concerns.
- 90% of staff received HIPAA training.
- 94% of Building Safety checks were completed on a monthly basis.
- 100% of all vehicles were equipped with First Aid Kits and Hazard/Fire equipment during vehicle checks.

- Promote principled behavior.
 - ➤ Apply the reward & recognition program to recognize staff who engage in highly principled behaviors.
- Minimize organizational risk.
 - ➤ Implement the annual risk assessment process.
- Risk Management Committee will ensure that staff training logs of offsite programs are keyed regularly in the training database to reflect accurate training statistics.

Goal #7: Strengthen alliances and partnerships with key stakeholders.

- Overall, the agency received \$457,331 for expanding existing services or for the development of new services which resulted in at least 53 consumers receiving services.
- The Psychiatric Rehabilitation Services program began development of an Intensive Community Treatment program using a new Medicaid funding stream.
- \$25,000 of Region IV Reinvestment funds were received to enhance clinical services for persons with Mental Retardation. In addition, 19 Chesterfield citizens received services from the Regional Behavioral team and 58 citizens were served by the Regional Jail Team.
- Due to an ongoing planning process with the Leadership Team of Chesterfield Schools, we are in the process of planning:
 - ➤ The development of some Day Services for Serious Emotionally Disturbed youth in conjunction with classroom activities in one of the schools.
 - Assigning Prevention Services to the schools with the greatest need for any one of their services based on an overall priority plan.

- We assumed the role of fiscal agent and administrative oversight of the development of a second site for a Regional Crisis Stabilization program on the grounds of Central State Hospital (Turning Point unit).
- For the past 2½ years, the Chesterfield CSB has served as the local lead agency and the facilitator for services for the early intervention system for Planning District 14. Effective July 2005, this program was successfully transitioned to Longwood University, which will serve as the local lead agency. During this past year, there were over 60 infants (birth to 3 years) and their families who were able to receive entitled early intervention services meeting all the federal regulations and receiving services in their natural environment where typically developing children participate.

• During the FY06 Strategic Planning process, it was determined that Goal 7: Strengthen Alliances and Partnerships with Key Stakeholders, was really an objective instead of an actual goal. This being the case, we made a recommendation to remove this goal and change it to an objective under Goal 5 for the FY06 Strategic Plan.

Project Priorization FY06

Project Name				
Establish mechanisms that will increase consumer & family involvement				
Review & refine productivity standards				
Implement Service Line Portfolio Analysis				
Clinical Programs eCET development				
MR eCET development				
Development of Pharmacy Dispensing Software				
Data Integrity Project				
Develop/implement additional Practice Guidelines				
Develop Long Range Plan Svc Needs Plan				
Data Warehouse				
Develop/implement additional Utilization Management approaches				
Front Desk Plus				
Develop levels of care/standards of care for community services programs				
Conversion of Relational database				
Complete implementation of the marketing plan				
Evaluate Training Effectiveness				
Develop a communication plan to enhance staff awareness of CSB values, ethics, regs & law				

FY06 Strategic Indicators

Agency	Domains	Strategic Objectives	Measures	Target	Actual	Last Qtr
Goal		Financial				
2	Financial	Increase Revenue Collections	Third party revenue compared to budgeted revenue	Within 3%		
2	Financial	Decrease Expenditures (overspending)	Expenditures compared to budgeted expenditures	3%		
2	Financial	Increase Staff Productivity	Productivity Rates	90%		
2	Financial	Increase Resources Available to Provide Services	Demand Ratio	1.0		
3	Customer Focus	Customer Increase Customer Satisfaction	Satisfaction Rates	90%		
	Customer Focus	ппп	Resolution of Formal Complaints	100%		
4	Service Quality	Increase Consumer Outcomes	Meeting Effectiveness Measures	100%		
4	Service Quality	Providing Appropriate Services	Level of Care indicators	75%		
2	Financial	Increase Access to Services	Programs with no waiting lists	100%		
6	Risk/Corporate Compliance	Internal Business Processes Reduce Risks	% Founded HIPAA Violations	0%		
6	Risk/Corporate Compliance	" "	Average cost per fraud/theft event	\$0		
6	Risk/Corporate Compliance	" "	% of sentinel event improvement efforts	0%		
6	Risk/Corporate Compliance	" "	Lost workerman's Comp. Hours	0		
6	Risk/Corporate Compliance	п	% of avoidable accidents	0%		
1	и в	Learning & Growth	m .	0.20/		
1	Human Resources	Retain Staff	Turnover rates	<9.2%		
1	Human Resources	Increase Organizational Communication	Staff satisfaction rates	90%		
1	Human Resources	Recruit Staff	Vacancy Cycle Time (8 weeks)	90%		
1	Human Resources	Professional Development	% of staff professional development plans	100%		



Key:

